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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number
10/527,467

Filing Date
March 11, 2005

First Named Inventor
ROBERT MUELLER et al.

Art Unit
3753

Examiner Name
John C. Fox

Attorney Docket Number

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	William D. Breneman, Esq.; BRENEMAN & GEORGES		
Signature			
Printed name	William D. Breneman		
Date	December 5, 2006	Reg. No.	26,714

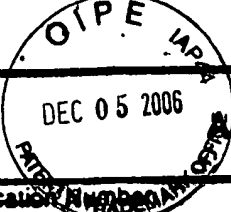
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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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			AMENDMENT TRANSMITTAL LETTER		Docket Number	
Application Number 10/527,467		Filing Date March 11, 2005		Examiner John C. Fox		Group Art Unit 3753
Invention Title SWITCH, ESPECIALLY FOR BRANCHING OFF BULK MATERIAL FLOWS						

TO THE COMMISSIONER OF PATENTS AND TRADEMARKS

Transmitted herewith is an amendment in the above - identified application.

- ☐ Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted.
☐ A verified statement to establish Small Entity status under 37 CFR 1.27 is enclosed.
☒ No additional fee is required.
☒ The fee has been calculated as shown below:

CLAIMS AS AMENDED

	(1)		(2)	(3)		
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT NUMBER EXTRA	RATE	FEE
TOTAL CLAIMS	20	minus	20	0	x \$12	0
INDEPENDENT CLAIMS	3	minus	3	0	x \$36	0
MULTIPLE DEPENDENT CLAIM ADDED					\$120	
					TOTAL	\$
If applicant is a small entity under 37 CFR 1.9 and 1.27, then divide total fee by 2, and enter amount here.					SMALL ENTITY TOTAL	\$

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3

** If the highest number previously paid for IN THIS SPACE is less than 20, enter "20".

*** If the highest number previously paid for IN THIS SPACE is less than 3, enter "3".

The "Highest number previously paid for" (total or independent) is the highest number found in the appropriate box in column 1.

- ☐ Please charge Deposit Account Number _____ in the amount of \$ _____.
A duplicate copy of this sheet is enclosed.
☐ A check in the amount of \$ _____ to cover the filing fee is enclosed.
☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account Number 02-3702.
A duplicate copy of this sheet is enclosed.
☒ Any additional filing fees required under 37 CFR 1.16.
☒ Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,



William D. Breneman

Reg. No. 26,714

Patent and Trademark Office • U.S. DEPARTMENT OF COMMERCE

December 5, 2006

(Date)



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

ROBERT MUELLER and
FRANZ-JOSEF VOGELSANG

Serial No.: 10/527,467

Group Art Unit: 3753

Filed: March 11, 2005

Examiner: John C. Fox

For: SWITCH, ESPECIALLY FOR BRANCHING OFF BULK
MATERIAL FLOWS

December 5, 2006

* * * * *

AMENDMENT

Honorable Commissioner of
Patents and Trademarks
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Responsive to the Office Action mailed September 5, 2006,
which time for response expires December 5, 2006, please consider
the evaluation of the prior art in the Remarks and please amend
the claims as indicated in the Listing of Claims.